

**Louisiana State Police
Bureau of Criminal Identification and Information
Baton Rouge, Louisiana**

FORMS MUST BE FILLED OUT IN INK AND BE REVIEWED BY SUBMITTING AGENCY/INDIVIDUAL FOR ACCURACY

****FINGERPRINTS ARE NECESSARY FOR A POSITIVE IDENTIFICATION****

****PLEASE PRINT****

Office of Financial Institutions-Depository

FACILITY OR AGENCY

Sidney E. Seymour, Chief Examiner

FACILITY OR AGENCY AUTHORIZED REPRESENTATIVE

Post Office Box 94095

MAILING ADDRESS

SIGNATURE OF AUTHORIZED REPRESENTATIVE

Baton Rouge, LA 70804-9095

CITY STATE ZIP CODE

(225) 925-4660

FACILITY OR AGENCY PHONE NUMBER

Request For: (pick one only)

- ☐ ALCOHOL AND BEVERAGE COMMISSION
- ☐ ALCOHOL BEVERAGE OUTLET
- ☐ CASA
- ☐ CONCEALED HANDGUNS
- ☐ CRIMINAL JUSTICE EMPLOYEE
- ☐ DAYCARE
- ☐ DENTISTRY BOARD
- ☐ DEPARTMENT OF LABOR
- ☐ DEPARTMENT OF PUBLIC SAFETY
- ☐ EMPLOYERS
- ☐ FIREFIGHTERS
- ☐ GAMING
- ☐ HEALTH CARE PROVIDER
- ☐ IMMIGRATION
- ☐ JUVENILE DETENTION CENTER
- ☐ DEPARTMENT OF INSURANCE
- ☐ MANUFACTURED HOUSING
- ☐ MEDICAL EXAMINERS
- ☐ OCS FOSTER/ADOPTIVE
- ☐ OCS PERSONNEL

■ OFFICE OF FINANCIAL INSTITUTIONS

- ☐ OFFICE OF PUBLIC HEALTH
- ☐ PHARMACY BOARD
- ☐ POSTSECONDARY EDUCATION
- ☐ PRACTICAL NURSING
- ☐ PRIVATE ADOPTION
- ☐ PRIVATE INVESTIGATORS
- ☐ PRIVATE SECURITY
- ☐ PUBLIC HOUSING
- ☐ PUBLIC TAG AGENT
- ☐ REGISTERED NURSING
- ☐ RELIGIOUS ACTIVISTS
- ☐ RIVERBOAT PILOTS
- ☐ SCHOOL
- ☐ SENATE AND GOVERNMENTAL AFFAIRS
- ☐ TAXI DRIVERS
- ☐ USED MOTOR VEHICLE COMMISSION
- ☐ VOLUNTEERS WITH YOUTH SERVING ORGANIZATIONS

APPLICANTS FULL NAME: _____

****PRINT - USE INK****

LAST FIRST MIDDLE
{INCLUDE MAIDEN NAME & PREVIOUS MARRIED NAMES IF APPLICABLE}

APPLICANTS SIGNATURE: _____

APPLICANTS SOCIAL SECURITY # ____ - ____ - ____ DATE OF BIRTH: ____ / ____ / ____

DRIVERS LICENSE # _____ & STATE _____ RACE _____ SEX _____

POSITION OR LICENSE APPLIED FOR _____

AUTHORIZATION TO DISCLOSE CRIMINAL HISTORY RECORDS INFORMATION

By my signature above, I hereby authorize the Louisiana State Police to release all pertinent criminal record information maintained in their files, other states files, or the FBI files (if applicable) which may confirm or deny my eligibility with the facility or agency named above.